V. DISCUSSION OF STUDY FINDINGS

EFAS incorporates both public and private sources of food assistance and provides food to low-income individuals and families on a short-term or long-term basis, depending on people's needs and circumstances. EFAS fills a gap in public assistance for a diverse clientele. EFAS clients include people who are either not getting or seeking public aid for which they are eligible, those who supplement public assistance, and those who are not eligible (or borderline-eligible) for public aid and who find that EFAS providers' services offer an additional cushion of food support.

The number and size of EFAS providers and the number of people they serve are impressive. Food pantries represent the largest component in the EFAS system and have become an important source of food for poor families over the last two decades, providing 6 million meal equivalents per day, or 2.2 billion meal equivalents per year (Ohls et al. 2001). Emergency kitchens provide about 173 million meals per year to poor individuals and families, and serve a much smaller number of people than food pantries. A USDA report to Congress estimates the size of private food assistance at one-tenth of the federal nutrition safety net (Ohls et al. 2001; Food and Nutrition Service 2001).¹

This chapter summarizes our findings about EFAS clients—who they are, why they seek or need food assistance, their material hardships, the barriers they face when seeking food assistance, and whether they seek assistance from emergency food providers as a supplement (or alternative to) food stamps or other food assistance programs that they may be eligible to

¹Daponte and Bade (2000) estimate the value or cost of private food assistance (including food, volunteer staff, and operating expenses of food banks and pantries) at \$2.3 billion annually.

participate in. We compare the household characteristics and food security of EFAS clients to the general low-income population in the U.S. Finally, we discuss EFAS utilization patterns in concert with public food assistance program participation for vulnerable population groups of policy interest, including households with children and households with seniors, to better understand the choices people make about the place or places they visit for food assistance.

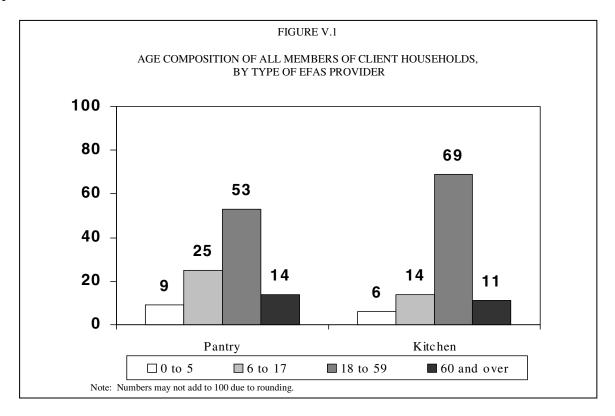
A. FOOD PANTRY AND EMERGENCY KITCHEN CLIENTS

Food pantries and emergency kitchens serve different and diverse populations, yet similar patterns for some client characteristics exist, such as employment and average annual household income. People who use emergency food assistance include single-parent families, low-income families with children, the homeless, the unemployed, the working poor, and families with elderly or disabled members. Significant overlap exists in clients who rely on both pantries and kitchens: about 19 percent of pantry client households reported receiving meals from emergency kitchens and 12 percent reported meals from shelters in the 12 months preceding the interview. More than one-third of kitchen clients (37 percent) reported food pantry use in the last year and 45 percent received meals from shelters, indicative of the high proportion of homeless kitchen clientele. Similar findings of cross-utilization of kitchen and pantry services by clients in the Second Harvest network were reported for the *Hunger in America 2001 Study*.²

Almost half (45 percent) of pantry client households are single-parent or married/cohabiting families with children, whereas only 20 percent of kitchen client households include children. About 18 percent of pantry client households are a female living alone. In contrast, emergency kitchen clients are typically a male living alone (38 percent) or a single adult living with other

²Fourteen percent of pantry client households reported kitchen use and 41 percent of kitchen clients reported food pantry use among clients in the Second Harvest network (Kim, Ohls, and Cohen 2001).

unrelated adults (18 percent). Figure V.1 displays the distribution of age groups across all pantry and kitchen client households (see Table D.10). Overall, about 34 percent of pantry household members and 20 percent of kitchen household members are children under age 18; about 40 percent of children are under age six. About 14 percent of pantry household members and 11 percent of kitchen household members are seniors.



About half of adult kitchen clients live alone and visit kitchens alone. Among homeless kitchen clients, two-thirds live alone and visit kitchens alone (data not shown). Among non-homeless clients we observed a different pattern. One third of non-homeless adults live with others, but visited the kitchen alone, suggesting that receiving a meal at a kitchen may be a coping mechanism used to stretch family food or resources. In addition, among the non-homeless, 9 percent of kitchen clients were accompanied by other adult family members and 16 percent were accompanied by children. Among homeless clients, 9 percent were accompanied by children.

1. Employment and the Working Poor

About one-fourth (26 percent) of both pantry and kitchen client households include an employed person. Mean annual household income is similar between the two types of clients (\$10,776 for pantry households and \$9,907 for kitchen households). However, pantry client households are larger than kitchen client households (mean household size of 2.9 compared with 2.1), resulting in a higher proportion of pantry client households below the poverty level compared with kitchen households. A high proportion of kitchen and pantry clients have less than a high school education, making it difficult to seek employment.

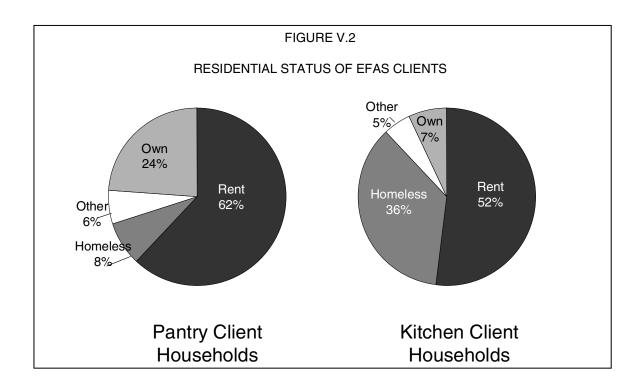
2. Material Hardships

In addition to poverty, most EFAS clients experience material hardships such as homelessness, lack of access to facilities to prepare or store food, and lack of transportation. On average, kitchen clients experience more severe hardships compared to pantry clients. Three-fourths of kitchen clients lack their own means of transportation, compared with half of pantry client households. Transportation problems are often cited as barriers to getting emergency food, but transportation is also a barrier for seeking employment, general assistance, or food stamp benefits (Food and Nutrition Service 2001). For the longer-term unemployed, barriers to work often include health and transportation problems and the cost of child care (Nichols-Casebolt and Morris 2001).

Eight percent of pantry client households and 36 percent of kitchen clients are homeless (see Figure V.2).³ In a national study of homeless assistance programs, Burt et al. (1999) found that

³Among America's Second Harvest network clients, three percent of pantry clients and 26 percent of kitchen clients considered themselves homeless (Kim, Ohls, and Cohen 2001.) The EFAS Client Survey uses the federal definition of homelessness, which includes clients who consider themselves homeless or who live in locations not intended to serve as permanent housing.

food pantries are the most numerous type of homeless assistance program, providing services to homeless individuals and families, particularly in rural areas. Other important homeless assistance programs, in order of the number of programs in the U.S. are shelters, transitional housing, and emergency kitchens (Burt et al. 1999). The EFAS Provider Survey found that 13 percent of pantries provided housing counseling and 24 percent of kitchens provided shelter to clients (Ohls et al. 2001).



3. Food Insecurity and Hunger

Overall food insecurity among the population who use EFAS services is high: 79 percent of pantry client households and 75 percent of kitchen client households. About 42 percent of pantry client households and 48 percent of kitchen clients are classified as food insecure with hunger. In contrast, the most recent national estimate of food insecurity with hunger, using the standard 18-

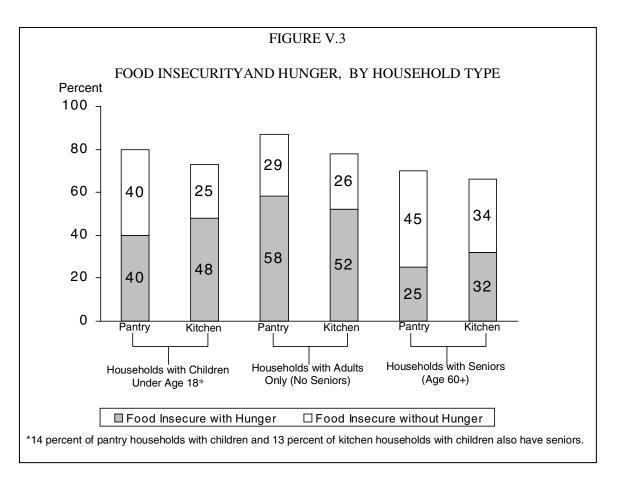
item food security measurement in the September 2000 Current Population Survey (CPS), is 11 percent of low-income households (Nord et al. 2002).⁴

About 41 percent of kitchen clients and 26 percent of pantry client households report that one or more adults had gone without eating for a whole day in the last 12 months, representing the most severe classification of food insecurity with hunger and a mechanism used by families to protect children from food insecurity and hunger, and common among homeless clients. The figure for kitchen clients (41 percent) is comparable to that found for adults visiting homeless assistance programs: 40 percent said that they went one or more days in the last 30 days without food to eat because they could not afford food (Burt et al. 1999).

Food insecurity with hunger was most common (48 percent) among kitchen client households with children (see Figure V.3). Food insecurity with hunger was less common (25 percent) among pantry client households with seniors, which might indicate that older people are reluctant to admit to having food security problems or that seniors have access to a strong set of other safety net programs to protect them from poverty and food insecurity. Among Food Stamp Program (FSP) participants in EFAS, 82 percent and 78 percent of pantry and kitchen clients households, respectively, are food insecure, a higher rate than that reported nationally for FSP participants (50 percent, in Cohen et al. 1999).⁵ Among EFAS clients who are also FSP participants, rates for food insecurity with hunger (44 percent of pantry client households and 55 percent of kitchen client households) are twice as high as the rate reported for the general FSP population (22 percent) (Cohen et al. 1999).

⁴Households with income at or below 130 percent of the poverty level. The CPS is a survey of households and therefore does not include those who are homeless or tenuously housed.

⁵The National Survey of Food Stamp Program Recipients was conducted between 1994 and 1999 and used the 18-item food security measurement (Cohen et al. 1999).



4. Fair or Poor Health Status

Poor health or disability (mental or physical) can affect the ability to seek emergency food assistance, and yet indicates an even greater need for adequate and appropriate food consumption. The EFAS client survey indicates poorer health status among EFAS users compared to other people in poverty in the U.S. About 54 percent of pantry clients and 41 percent of kitchen clients reported that they were in 'fair or poor health' compared to 32 percent of poor women and 31 percent of poor men in the general population. Poor women report more severe health problems compared to poor men, which explains a higher proportion of 'fair or

⁶Self-reported health is used as a broad indicator of health and well-being and has been shown to be a reliable indicator of a person's overall health status (Pamuk et al. 1998).

⁷Poor is defined as below the poverty level; estimates are based on data from the National Health Interview Survey.

poor health' among pantry respondents, who are typically women picking up food packages for the household. Similar findings of self-reported health status were reported by Second Harvest network clients (Kim, Ohls, and Cohen 2001).

5. Accessibility and Client Satisfaction with EFAS Providers

EFAS serves clients with short-term and long-term needs and most clients are able to get food from EFAS providers when they need it. When clients cannot get food from EFAS providers, it is usually because they have transportation problems or did not arrive on time. Indeed, most (over 90 percent of) EFAS clients who visit providers are highly satisfied with the amount and variety of meals or food they receive.

Consistent with evidence from other sources, such as America's Second Harvest study (Kim, Ohls, and Cohen 2001), the EFAS survey indicates high levels of client satisfaction with the quantity and variety of food received from emergency kitchens and food pantries. Clear majorities of clients are "very satisfied" with the amount and variety of food they receive at pantries and kitchens, and more than 90 percent of clients are either "very satisfied" or "somewhat satisfied" with the food they receive. While some significant variations exist in client satisfaction by race/ethnicity and other client characteristics, most clients appear to be satisfied with the food they receive from the provider they visited on the day of the interview.

6. Faith-based Services

Faith-based organizations (FBOs) play an important role in providing emergency food and housing assistance to needy individuals and families. Two-thirds of EFAS providers are affiliated with faith-based organizations (Ohls et al. 2001). Organizations such as Catholic Charities have conducted surveys to document and report increases in requests for local aid following welfare reform legislation (Catholic Charities 2000). The survey of EFAS kitchen and

pantry providers and their clients provides important evidence on FBOs provision of nutritional assistance to the poor. The EFAS survey includes questions on provider affiliations with religious organizations as well as client perceptions of provider-sponsored religious activities.

About three-fifths of EFAS pantry and kitchen clients receive services from a provider affiliated with Catholic Charities, the Salvation Army, or some other religious organization and which could thereby be classified as "faith-based." Pantry respondents visiting a pantry run by an FBO are somewhat more likely to be asked to participate in religious activities than are pantry respondents visiting a pantry not run by an FBO. Among emergency kitchen clients, however, the likelihood of being asked to participate in religious activities does not vary significantly according to whether the kitchen is run by an FBO. Overall, about one in three kitchen clients and about one in seven pantry respondents are asked to participate in religious activities. Of those clients asked to participate in religious activities, about two-thirds report they are "very comfortable" with these activities, while only 1 in 10 say they are "uncomfortable" or "very uncomfortable" with them.

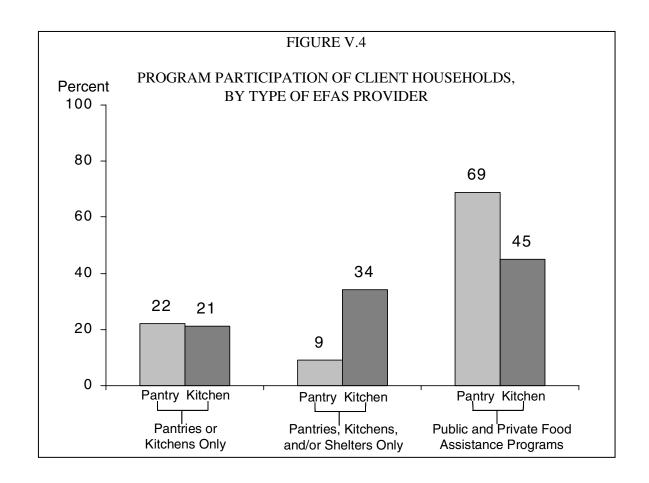
B. USE OF PRIVATE AND PUBLIC FOOD ASSISTANCE PROGRAMS

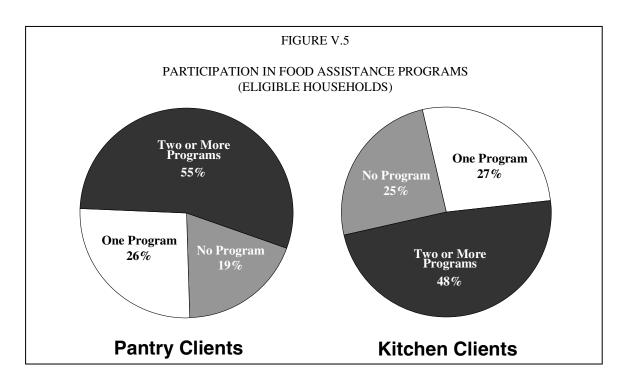
Although the U.S. Congress budgeted \$37 billion for domestic nutrition programs in fiscal year 2002 (USDA Office of Budget and Program Analysis 2002), these programs do not appear to serve all the food needs of low-income individuals. For a variety of reasons, many low-income or otherwise needy people turn to private organizations for short- or long-term food assistance, either in addition to, or instead of, participation in public food assistance programs. The survey of pantry and kitchen users sheds light on the reasons clients seek EFAS services, the diverse sources of food assistance for these needy individuals, and the reasons for not participating in public nutrition programs. Overall, 93 percent of pantry client households and 86 percent of kitchen clients have household incomes at or below 130 percent of the poverty

level in the month before their EFAS visit, an indicator that they are likely to be eligible for public assistance programs.

The client survey inquired about participation in seven public food assistance programs: the Food Stamp Program; the Special Supplemental Nutrition Program for Women, Infants, and Children; the School Breakfast Program; the National School Lunch Program; the Summer Food Service Program; nutrition programs for the elderly; and child care and Head Start feeding programs. About one-fifth (22 percent) of pantry client households rely on food pantries for assistance without seeking additional support from one of these public programs or from other forms of EFAS, in this case, kitchens or shelters (Figure V.4). A similar fraction of kitchen client households relies on soup kitchens for assistance without using public food assistance programs or pantries or shelters. Nine percent of pantry client households, and 34 percent of kitchen client households, rely on food from multiple forms of EFAS but not on public food assistance programs. About two-thirds (69 percent) of pantry client households and nearly half (45 percent) of kitchen client households rely on at least one of the aforementioned public food assistance programs. Among pantry and kitchen households eligible for one or more public programs, about three-quarters participate in at least one program, and about one-half participate in two or more programs (Figure V.5).

Despite the fact that a majority of pantry client households, and nearly half of kitchen client households, are receiving support from public programs, the EFAS client surveys suggest that a majority of clients favor private food assistance over public programs. Seven of every 10 pantry respondents indicate that they prefer private assistance over a government program, and 2 of every 3 kitchen clients indicate such a preference. About 36 percent of pantry respondents and 41

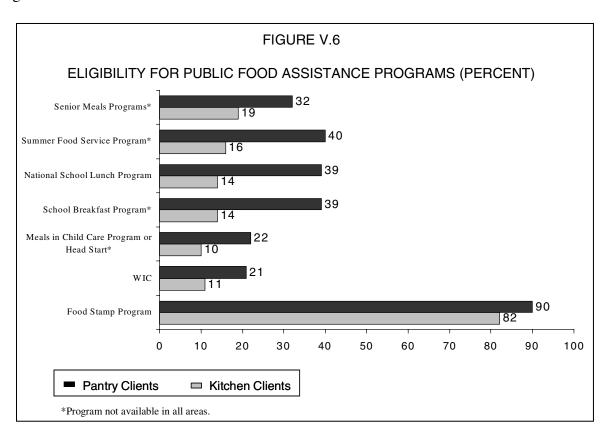




percent of kitchen clients indicate that problems with food stamps or welfare were factors in their seeking and using EFAS services. Nonetheless, as noted below, more EFAS clients rely on the Food Stamp Program than on any other government nutrition assistance program.

1. Use of the Food Stamp Program by EFAS Clients

The Food Stamp Program (FSP) is by far the largest of government food assistance programs, accounting for more than half (\$21 billion) of federal food assistance program funding appropriated for fiscal year 2002. About half (48 percent) of pantry client households receive food stamps, compared with about one-third (36 percent) of kitchen client households. Eligibility for food stamps is substantially higher among EFAS pantry and kitchen clients than is eligibility for any other public food assistance program (Figure V.6). Among seemingly eligible households, 55 percent of pantry client households receive food stamps, similar to the nationwide participation rate of 59 percent in 2000 (Cunnyngham 2002), but only 44 percent of eligible kitchen client households receive FSP benefits.



Why do many EFAS client households (particularly kitchen client households) not receive the food stamp benefits for which they appear eligible? In many instances, it appears that household members have unproven doubts about their eligibility for FSP benefits. Among seemingly eligible pantry households that have not received food stamps during the last year, only 7 percent say they had applied for food stamps and had been turned down. Among the remaining households, 47 percent say they have not applied for food stamps because they think they do not qualify for benefits. Among seemingly eligible kitchen clients who have not received food stamps during the last year, only 12 percent say they had applied for food stamps and had been turned down. Among the remaining households, 36 percent say they have not applied for food stamps because they think they do not qualify for benefits. Nationally, most non-participating FSP-eligible households, including those who previously participated in the program, did not apply for assistance due to doubts about their eligibility (Ponza et al. 1999). There is also evidence that EFAS clients may have experienced a recent drop in income (since current average income is less than average monthly income in the last year), and that EFAS providers play an important role in meeting the immediate food needs of people who have experienced a drop in income.

About 11 percent, and 14 percent, of pantry and kitchen client households, respectively, received food stamps during the last year, but had not received benefits in the most recent month. About one-quarter (26 percent) of pantry client households that formerly received food stamps had been turned down for benefits during the last year, the most common reason being that household income was too high (55 percent of households affected). About 21 percent of kitchen client households that formerly received food stamps had been turned down for benefits during the last year, the most common reason being failure to comply with work requirements (46 percent of households affected). Thus, to the extent that FSP-related work requirements for

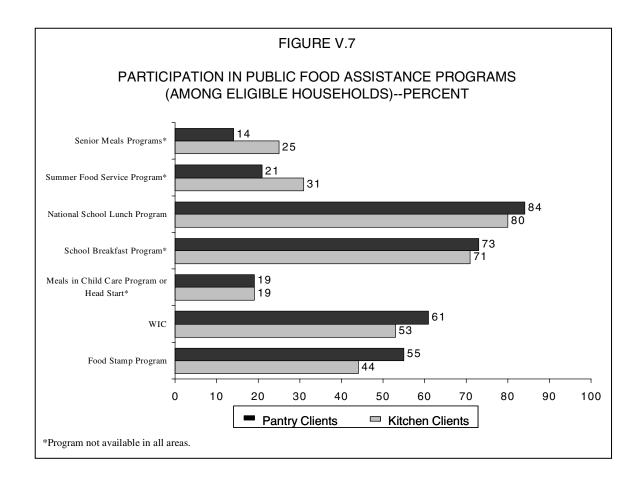
Able Bodied Adults Without Dependents (ABAWDs) adopted in conjunction with the 1996 Personal Responsibility and Work Opportunity Reconciliation Act have affected EFAS clients, it appears that this effect is more prevalent among adult kitchen clients than among members of pantry client households.

2. Use of the Child Nutrition Programs by EFAS Clients

Congress appropriated \$11 billion for child nutrition programs during FY 2002, including the National School Lunch Program (NSLP), School Breakfast Program (SBP), Summer Food Service Program (SFSP), Special Milk, and Child and Adult Care Food Programs. In addition, Congress appropriated \$4.3 billion for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), which serves pregnant women, nonbreastfeeding postpartum women, breastfeeding women, infants, and young children. While fewer EFAS clients participate in each of these programs than in the Food Stamp Program, participation rates of seemingly eligible households tend to be somewhat higher than the corresponding FSP participation rates. For the NSLP, 84 percent of eligible food pantry households and 80 percent of eligible kitchen client households receive free or reduced-price meals (Figure V.7). For the SBP, 73 percent of eligible food pantry households and 71 percent of eligible kitchen client households receive free or reduced-price meals.

For WIC, 61 percent of eligible food pantry households and 53 percent of eligible kitchen client households receive benefits. Both of these participation rates are lower than the 81 percent national participation rate of eligible individuals in WIC (http://www.fns.usda.gov/wic/FAQs/FAQ.HTM#4, accessed on July 3, 2002). Only for the Summer Food Service Program are participation rates of eligible households somewhat lower than for the Food Stamp Program: 21 percent for eligible pantry households and 31 percent for

eligible kitchen client households. Most EFAS clients say that they are not aware of the SFSP, which is not available in all areas of the nation.



When seemingly eligible pantry and kitchen client households do not participate in the NSLP or WIC, it is most often because household members do not think they are eligible for these programs. Respondents for 23 percent of pantry client households and for 24 percent of kitchen client households cite this reason for the NSLP. Respondents for 56 percent of pantry client households and 48 percent of kitchen client households cite this reason for WIC.

When seemingly eligible pantry and kitchen client households do not participate in the SBP, it is most often because the children eat breakfast at home, cited by one-third of pantry households and two-fifths of kitchen client households. However, it is not known whether or not the SBP was offered in the child's school or whether or not they were even aware of the

program. When seemingly eligible pantry and kitchen client households do not participate in the SFSP, it is most often because they do not know about the program or its location. This reason is cited by nearly half of EFAS clients (47 percent of both pantry and kitchen client households).

If policymakers desire to increase the participation of eligible EFAS clients in government food assistance programs, several types of changes might be helpful. In general, it would be useful to make it easier for low-income individuals to determine if they are, in fact, eligible for public food assistance. In the case of the SBP, publicizing the benefits of school breakfasts might help increase participation in the program. In the case of the Summer Food Service Program, many more parents need to be made aware of the program's existence. Outreach efforts could also be expanded within EFAS pantries and kitchens, where at present only one in six providers offer FSP or WIC-related counseling (Ohls et al. 2001).

3. Contrasting Households with Different Program Participation Patterns

Depending on whether they rely on only one form of private food assistance (pantries or kitchens), on multiple forms of private food assistance (pantries, kitchens, and/or shelters), or on public and private food assistance programs, pantry and kitchen client households differ in terms of their demographic characteristics, income levels, and material hardships. In general, EFAS client households relying on public food assistance programs are more likely than other EFAS client households to include children under age 18. This finding is not surprising, since five of the seven public food assistance programs highlighted in the survey are targeted to children. Because they are more likely to include children than are other client households, households combining private food assistance with at least one public food assistance program also tend to be larger than households not using a public food assistance program.

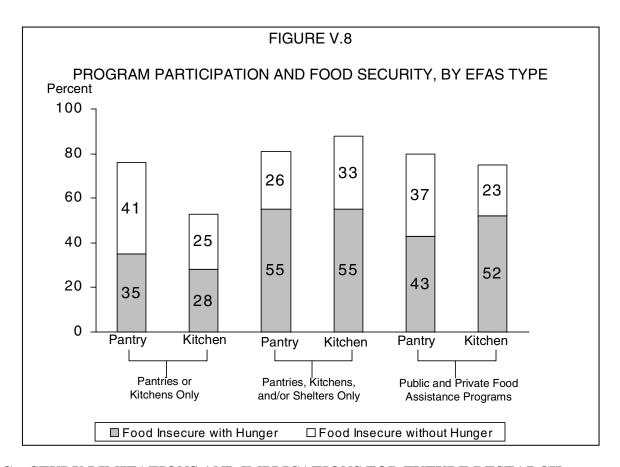
Client households using either EFAS pantries or EFAS kitchens, but not other forms of private or public food assistance, often give indications of higher levels of income, and lower

levels of poverty, than other client households. This finding is consistent with the fact that most of the public food assistance programs are means-tested. Households with relatively high levels of income (such as income above 130 percent of the poverty level) are likely to be ineligible for certain programs, such as the FSP or free school breakfasts and lunches.

Material hardships are more severe for households using multiple forms of private food assistance with no public food assistance programs than for households using public and private food assistance programs. Households using multiple forms of EFAS—food pantries, soup kitchens, or meals served at shelters—are more likely to be homeless than are other client households. These same households are more likely to be food insecure with hunger than are other client households. For pantry and kitchen client households using multiple forms of private food assistance, over half (55 percent) are food insecure with hunger (Figure V.8). In comparison, hunger is somewhat less prevalent (43 percent) among pantry client households using public food assistance programs, and substantially less prevalent (at rates of 35 and 28 percent, respectively) among households using no public food assistance programs but rather pantries or kitchens only.

Because three-fifths of pantry client households, and four-fifths of kitchen client households, using multiple forms of private food assistance have neither children nor elderly members, the public food assistance program for which these households are most likely to be eligible is the Food Stamp Program. At least four-fifths of pantry and kitchen households using multiple forms of private food assistance appear to be eligible for the FSP. However, these eligible households are twice as likely to be convinced that they are ineligible for food stamps as are eligible households using public food assistance programs. Consequently, expanding awareness of FSP eligibility may be a key to increasing food stamp participation, and decreasing hunger, among

the highly disadvantaged households seeking food from multiple forms of emergency food assistance.



C. STUDY LIMITATIONS AND IMPLICATIONS FOR FUTURE RESEARCH

Due to the 4-month field period and time limitations of the client survey, some important research topics could not be fully addressed in this study. First, we could not measure seasonal patterns of EFAS use over a year's time period, making it difficult to accurately estimate the numbers of people served annually by EFAS pantries and kitchens. Second, the sample design and sample sizes limit the ability to make comparisons of household characteristics and utilization patterns between clients residing in urban or in rural areas. Third, time limitations on the survey did not allow us to capture more detailed information about the number of different kitchens or pantries visited by clients or clients' past use of EFAS or federal food assistance programs for time periods longer than a year.

Additional analysis of EFAS survey data (combining provider data with client data) could be conducted to further study the interrelationships of factors related to the frequency and duration of EFAS use, client characteristics, and provider characteristics. Examples of research questions that could be addressed with additional descriptive or multivariate analysis include:

- *EFAS provider services*: Among clients who are eligible, but not participating in public programs, what proportion of EFAS providers they visit provide referral or counseling services for federal food assistance programs such as the FSP? Among those clients who report being in fair or poor health, what services such as nutrition counseling, nutrition education, or medical referrals are provided by the providers they visit?
- *EFAS clientele*: Among EFAS clients who are classified as food secure, further explore the relationship between household characteristics (income, employment, and public food assistance program participation), EFAS utilization patterns, and EFAS provider characteristics.
- *ABAWDs*: Explore the link between waivers of FSP work requirements for ablebodied adults without dependents (ABAWDs) and the use of EFAS services by ABAWDs. It is possible that, in states that have obtained waivers of FSP work requirements for ABAWDs, ABAWDs constitute a smaller proportion of the population using EFAS services.
- *Food security research*: Conduct additional analysis of the individual food security questions to assess the performance of the 6-item short form in this population of EFAS users. Our initial analysis indicates that the addition of a seventh question may be useful to distinguish moderate and severe levels of food insecurity with hunger among this population.

D. SUMMARY

The emergency food assistance system serves the needs of large numbers of diverse groups in the U.S. low-income population—single-parent families, families with children, the homeless, the unemployed, the working poor, and seniors. EFAS clients experience more severe hardships in comparison to the general low-income population in the United States—they report being in fair or poor health more often, and experience higher rates of homelessness, food insecurity, and hunger. These hardships appear to be more severe for EFAS client households using multiple forms of EFAS (pantries, kitchens, and/or shelters) but not public food assistance programs, than

for client households using public food assistance programs. Still, three-quarters of households combining public and private food assistance programs experience food insecurity. Food insecurity with hunger ranges from one in four among pantry client households with seniors, to one in two among kitchen client households with children. These study findings have implications for nutrition policymaking and outreach related to public food assistance programs, and contribute to a better understanding of the role of the EFAS in providing food assistance and related services to those in poverty and need.